

IN THE CHANCERY COURT OF HAMILTON COUNTY, TENNESSEE	PETITION FOR TESTATE ADMINISTRATION	PART 2 PROBATE DIVISION FILE NO. _____
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IN THE MATTER OF THE ESTATE OF _____

DECEASED

ITEM 1. PETITIONER(S).

Relationship of Petitioner(s) to the deceased was _____

ITEM 2. PERSONAL REPRESENTATIVE(S).
 Petitioner(s) seek to have _____
 appointed as personal representative(s) for this estate and verily believe said person(s) stand ready, willing and qualified to
 undertake the office as required by law and will furnish bond as directed by the COURT.

ITEM 3. DECEASED.
 The deceased died on _____ at the age of _____ at _____
*Date**City & State*
 Decedent's residence at time of death was:
 _____,
*Street and Number**City**State**Zip Code*

ITEM 4. TENNCARE. At time of death, was Decedent enrolled in TennCare? ☐ Yes ☐ No ☐ Unknown

ITEM 5. WILL. The document(s) offered for probate were executed on _____ and the names of all attesting witnesses are: _____
 The ORIGINAL document(s) offered for probate are herewith presented to the COURT for probate. A true copy of the document(s) is tendered herewith as exhibit to this petition.

ITEM 6. OTHER DOCUMENTS. Petitioner(s) is/are not aware of any instrument revoking the document(s) being offered for probate. Petitioner(s) aver that a search has been made for a subsequently dated will or codicil and none has been found and verily believe the document(s) being offered for probate constitute Decedent's last will and testament.

ITEM 7. DEVISEES & LEGATEES. The following are the devisees and legatees under the will:

Name	Age	Relation	Mailing Address	Zip Code

ITEM 8. HEIRS. The following are those who are not devisees and legatees under the will who would otherwise be entitled to Decedent's property as heirs at law if there were no will:

Name	Age	Relation	Mailing Address	Zip Code

ITEM 9. DISABILITY. Those persons listed in Items 7 and 8, if any, who are under disability are:

ITEM 10. VALUE.	Estimated gross value of this estate for Tenn. inheritance tax purposes is \$	
	Estimate of the fair market value of the estate to be administered is:	Personalty \$ Real Estate \$
	Said real estate is situated in _____ . (County and State)	
ITEM 11. BOND.	<input type="checkbox"/> NOT WAIVED <input type="checkbox"/> WAIVED in Will at:	
ITEM 12. INVENTORY.	<input type="checkbox"/> NOT WAIVED <input type="checkbox"/> WAIVED in Will at:	
PREMISES CONSIDERED, PETITIONER(S) PRAY		
1. That the will be proved and established, probate of said will be granted, and the same ordered for record.		
2. That the CLERK & MASTER be directed to qualify the personal representative and to issue letters as directed by the COURT.		
3. That notice <input type="checkbox"/> be given for creditors of Decedent's estate requiring them to file their claims. T.C.A. § 30-2-306(a). by publication <input type="checkbox"/> not be given. T.C.A. § 30-2-306(e).		
4. That if bond is required and if the inventory reveals the estate exceeds the amount as set out in this petition, the personal representative be required to increase the bond accordingly.		
5. That inventory be waived or that 60 days be allowed for filing. T.C.A. § 30-2-301(a).		
6. That affidavits to each devisee or legatee be waived or that 60 days be allowed for filing. T. C. A. § 30-2-301(b)(1)(A).		
7. That, for a decedent who was 55 years or older at time of death, the affidavit of notice to TennCare be filed within 60 days. T. C. A. § 30-2-301(b)(5).		

Petitioner

Address

Petitioner

Address

Petitioner

Address

Petitioner

Address

WE ARE SURETY FOR COSTS IN THIS CAUSE.

Attorneys for Petitioner

By _____
BPR#

Address

Tel. NO.

Fax NO.

**CHANCERY COURT OF
HAMILTON COUNTY TENNESSEE** }

Sworn to and subscribed before me

this ____ day of _____, 20____.

S. LEE AKERS, CLERK & MASTER

By _____

—
Deputy Probate Clerk

MASTER'S REPORT

TO THE HONORABLE HOWELL N. PEOPLES, CHANCELLOR:

From an examination of Petitioner(s) and witnesses under oath it appears that the facts stated in the petition are true, that the will dated _____ is the true and entire last will of the deceased, executed and proved according to law, that to the best knowledge of Petitioner(s) the estimated gross value of this estate for inheritance tax purposes is \$_____, and that after proper qualification letters be issued to:

The executor _____

Bond:	<input type="checkbox"/> Waived	<input type="checkbox"/> Set at \$
Inventory:	<input type="checkbox"/> Waived	<input type="checkbox"/> 60 days to file accurate inventory of the probate estate. T.C.A. § 30-2-301(a).
Affidavit of Notice to each devisee or legatee:	<input type="checkbox"/> Waived	<input type="checkbox"/> 60 days to file affidavit. T. C. A. § 30-2-301(b).
Affidavit of Notice to TennCare:	<input type="checkbox"/> N/A	<input type="checkbox"/> 60 days to file affidavit. T. C. A. § 30-2-301(b)(5).

This ____ day of _____, 20____.

S. LEE AKERS, CLERK & MASTER